



Memorandum

To: Jeff Montera, Project Manager

From: Angela Frandsen, Quality Assurance Manager *af*

Reviewed by: Krista Lippoldt, Quality Assurance Coordinator for EPA Region VIII RAC

Date: October 21, 2002

Subject: Libby CSS QAM checklist for 9/22/02 to 10/5/02

The following summarizes the QA activities that are being verified biweekly by the QAM for the Libby CSS. These activities are discussed in Section 7 of the CSS Final SAP. This memorandum covers the above-referenced two-week time period.

1. Field Team Orientation

(QAM will attach the signature page for each orientation)

Number of new field team members: 0

Number of field team member orientations: 0

2. Field Form Completion Checks (IFFs and FSDSs)

(QAM will perform a 10% check on completed field forms sent to Helena for evidence that field team members are doing the required QC checks.)

Number of IFFs completed: 290 between 9/22 and 10/5/02

Number of IFFs received in Helena: 279 (IFFs shipped to Helena would include those from 9/20 to 10/3 because they are shipped on Fridays)

Number and percent of IFFs checked by the QAM for completeness and correctness: 32 (11.5%); 1 form was found with a problem (see attached list).

Corrective Action: List of IFF forms with problems sent to CSS Task Leader for corrective action - see attached list for details on corrective actions taken

Number and percent of IFFs checked by the CSS task leader for completion and correctness: 290, 100%

Number of FSDSs completed: 455 between 9/8 and 9/21/02

Number of FSDSs received in Helena: 477 (FSDSs shipped to Helena would include those from 9/20 to 10/3 because they are shipped on Fridays)

Number and percent of FSDSs checked by the QAM for completeness and correctness:
49 (10.3%); no problems found.
Corrective Action Taken: None required
Number and percent of FSDSs checked by the CSS task leader for completion and
correctness: 455, 100%
Comment: None

3. Supplemental Verification of Vermiculite Product
(*CSS field team leader to notify QAM by email if this occurs*)
Number of occurrences of supplemental verification: None
Addresses of verifications: NA

4. Screening Field Checks
(*CSS task leader will check 2% of all properties*)
Total number of properties sampled up to 9/21/02: 2461
Total number and percent of screening field checks performed by task leader: 12
checks during this two week time period; 50 (2.0%) properties have been
checked overall.
Comment: None

5. Field Audits
Field audit conducted when and by whom? None.

6. Field QC Samples (July 28 through August 10, 2002)
Field Duplicates (1/20)
Number of field samples collected: 930
Number of duplicates collected: 50
Ratio: 1.08/20
Equipment Blanks (1/day)
Number of days soil sampling occurred: 12
Number of equipment blanks collected: 12
Ratio: 1/day

Aqueous Rinsates (1/day, 3 different weeks throughout field season)

Number of days expected to collect rinsates during the time frame: 0

Number of rinsates collected: 0

Ratio: NA

Next time period rinsates expected to be collected: Week of October 28

Total number of rinsates collected since sampling began: 12

Comment: None

Preparation Duplicates (1/20)

Number of samples prepared by the CDM laboratory: 723 dried

Number of preparation duplicates collected: 37

Ratio: 1.02/20

Preparation Blanks (1/day)

Number of days that samples were prepared by the CDM laboratory: 8

Number of preparation blanks collected: 6

Ratio: 0.75/day

Comment: T. Burgesser was reminded that preparation blanks must be collected at a rate of once per day.

SEM/IR Splits (first 500 samples: 1/5 of IR \leq 0.5%, 1/10 of IR $>$ 0.5% and \geq 1%)

Total number of samples \leq 0.5%: None yet

Number and percent of SEM/IR splits: None yet

Total number of samples $>$ 0.5% and \geq 1%: None yet

Number and percent of SEM/IR splits: None yet

Comment: No laboratory yet under contract to perform IR soil analysis. Anni Autio (laboratory coordinator) in charge of arranging this once laboratory is subcontracted.

7. Data Entry Checks (10% of Volpe data entry)

Number of data entries: None (no analytical results)

Number and percent of data entries checked: None (no analytical results - data entry to be checked after analytical data are uploaded into database)

Name of person(s) checking data entries: NA at this time

8. Data Validation

Number of samples validated and reviewed and by whom: None, no analytical results yet

Number of sample results rejected: 0 out of 0

9. CDM Document Review

Documents issued to the client: Final SAP Addendum for the Drive in Theater
(9/26/02)

Which ones required Editorial Review and was review conducted? Editorial review not performed. K. Lippoldt, author, was reminded that editorial reviews must be conducted on all documents sent to the client.

Which ones required Technical Review and was review conducted? Final SAP, Yes

Which ones required QA review and was review conducted? Final SAP, Yes

Field Record of Deviation/Request for Modification forms completed and sent to EPA for approval: None

Overall Comments: None

cc: Jim Christiansen, EPA
Mary Goldade, EPA
Mark Raney, Volpe
Krista Lippoldt, CDM
Dee Warren, CDM
Dave Schroeder, CDM
Terry Keller, CDM
George DeLullo, CDM
Tim Wall, CDM

IFFs that need to be corrected:

Period: Paperwork received for 9/22/02 through 10/5/02

IFF BD#'s 10% QC Check problem found

Corrective Action Taken

Date Corrected

BD-002048	Soil sample locations not posted on the property sketch.	Locations added by sampling team	10/24/2002
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FORMATION FIELD FORM (continued)

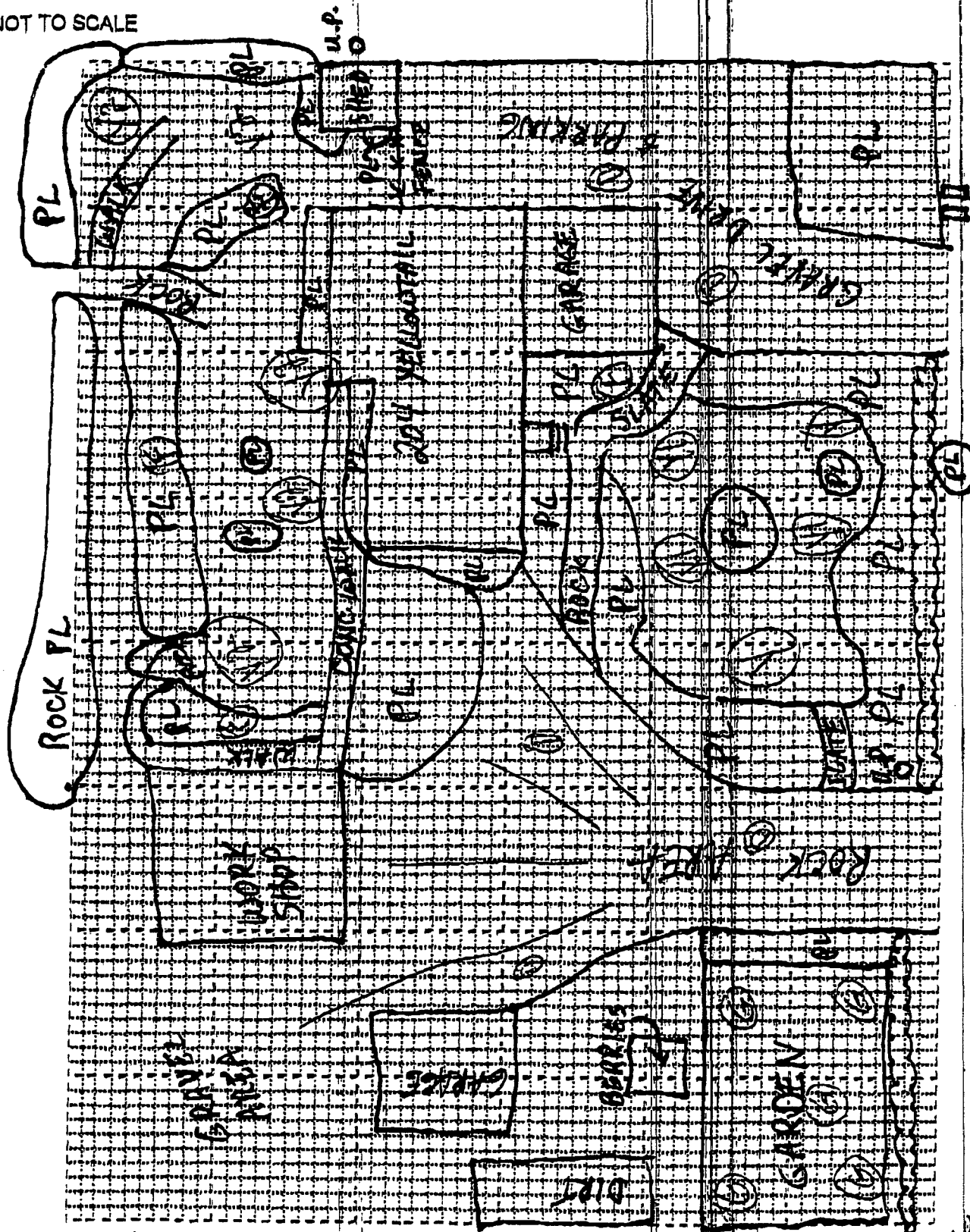
204 YELLOWTAIL

BD# 008048

FIELD DIAGRAM OF PROPERTY

Identify important features (i.e. drainage, trees, gardens, structures, flowerbeds, utility poles, known underground utilities, suspected Libby amphibole source areas, sample locations, etc). Include north arrow.

NOT TO SCALE



204 YELLOWTAIL

204

DW 10-7-02

FSDSs that need to be corrected:

Period: Paperwork received for 9/22/02 through 10/5/02

FSDS CSS#'s 10% QC Check problem found

Corrective Action Taken

Date Corrected

No problems found		
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CSS Task Leader Screening Field Checks (2% checks) for 9/22/02 - 10/5/02

BD Number	Address	Discrepancy and Corrective Action
BD-002324	302 Woodland Heights	No issues
BD-002217	35 Pearl	No issues
BD-002429	12 Timber Ln	No issues
BD-002489	510 Utah Ave	No issues
BD-002520	33 Parmenter Creek Rd	No issues
BD-002414	2608 2nd St Ext	No issues
BD-002506	1250 5th St Ext	Issue - number of rooms on first floor was entered as number of floors
BD-002521	368 Parmenter Creek Rd	No issues
BD-002512	37 Vicks Ln #11	Issue: Access agreement was not signed before IFF information was collected. Access agreement was however, signed before team left property.
BD-002568	203 E 2nd St	No issues
BD-002584	33 Kearney Ave	No issues
BD-002588	127 Upper Flower Creek Rd	No issues

BD- 002506

Soil samples collected (Date: 10-5-02 W3)

LIBBY ASBESTOS PROJECT
Contaminant Screening Study
Primary Structure and Property Assessment Information Field Form (IFF)

Field Logbook No.: 100134 Page No.: 115 Site Visit Date: 10/02/02
 Address: 1290 E. 5th Extension Structure Description: House
 Occupant: Efrida Peck Phone Number: 277-0104
 Owner (if different than occupant): Efrida Phone Number: —
 Sampling Team: Oct 17 10/2/02 Don Kozlowski, Kim Taylor, Don Kozlowski
 Field Form Check Completed by (100% of forms): Don Kozlowski
 Screening Field Check Completed by (2% of forms): Dee Wawer CDM

Data Item	Value	Notes
HOUSE ATTRIBUTES		
Property Description	<input checked="" type="radio"/> Residential <input type="radio"/> Industrial <input type="radio"/> Commercial	
Surrounding Land Use	<input checked="" type="radio"/> Residential <input type="radio"/> Industrial <input type="radio"/> Commercial <input type="radio"/> School <input type="radio"/> Mining Other: <u>12102</u>	
Year of Construction	<u>1974</u> <input type="radio"/> Unknown <u>1954</u>	
Square Footage	<u>1200</u> (<u>30x40</u>)	
Construction Material	<input checked="" type="radio"/> Wood frame <input type="radio"/> Masonry/Stone Other: <u>—</u>	
Number of Floors Above Ground	<input checked="" type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 Other: <u>5</u> <u>KT 10/2/02</u>	
Number of Rooms Per Floor Above Ground	1: <u>5</u> 2: <u>—</u> 3: <u>—</u> Other: <u>5 DW 12-2-02</u>	
Basement	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Heating Source	<input type="radio"/> Wood/Coal <input type="radio"/> Electric <input type="radio"/> Propane/Gas Other: <u>Oil</u>	
Heat Distribution	<input checked="" type="radio"/> Forced air <input checked="" type="radio"/> Radiant Other: <u>—</u>	

10/3/02

CDM Federal Programs Corporation

Quality Control Review Sheet

Contract Name: <u>RAC VIII</u>	Project Number: <u>3282-116</u>
Document Type: <u>Final SAP Addendum</u>	Number of Pages: <u>10</u>
Document Title/DCN: " " for Drive In Theater - #15682	
Initiated By: <u>K. Lippold</u>	Product Author: <u>K. Lippold</u>
Date Initiated: <u>9/26/02</u>	Date Due to Client: <u>9/26/02</u>
QCC:	Internal Due Date:

Reviews Required	Document Version
<input type="checkbox"/> Editorial <input checked="" type="checkbox"/> Technical <input type="checkbox"/> QCC <input checked="" type="checkbox"/> QA*	<input type="checkbox"/> Preliminary Draft <input type="checkbox"/> Working Draft <input type="checkbox"/> Final Draft <input type="checkbox"/> Final Document
Regulatory Review Engineering Review Other:	
Estimated Review Hours: Editorial: _____ Technical: _____ QCC: _____ QA: _____ Regulatory: _____ Engineering: _____ Other: _____ Charge Number: <u>3282-116-PP2-SAPDE</u>	

*QA review is required for work plans, field plans, measurement reports, and documents procuring technical services.

Editorial Reviewer:	Due Date	Date Reviewed	Signature
Report Item	No Changes	See Text for Changes	Please Call to Discuss
Overall Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Format	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clarity, Consistency, Grammar	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reference List/Citations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tables/Figures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
QCC Confirmation of Changes <input type="checkbox"/>			

Technical Reviewer:	Due Date	Date Reviewed	Signature
Report Item	No Changes	See Text for Changes	Please Call to Discuss
Intended Scope Stated	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Technical Adequacy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Calculations Checked	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Tables/Figures Support Text	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Conclusions Justified	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
QCC Confirmation of Changes <input type="checkbox"/>			

Additional Reviewer: <u>A. DeLufo</u>	Date Reviewed: <u>9/26/02</u>	Signature: <u>[Signature]</u>
<input checked="" type="checkbox"/> QA <input type="checkbox"/> Regulatory <input type="checkbox"/> Engineering <input type="checkbox"/> Other		

Word Processor:	Signature:
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QCC Final Confirmation Signature: _____ Date: _____

Memorandum

To: Jeff Montera, Project Manager

From: Angela Frandsen, Quality Assurance Manager *alf*

Reviewed by: Krista Lippoldt, Quality Assurance Coordinator for EPA Region VIII RAC

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Krista Lippoldt, CDM
Dee Warren, CDM
Dave Schroeder, CDM
Terry Keller, CDM
George DeLullo, CDM
Tim Wall, CDM

IFFs that need to be corrected:

Period: Paperwork received for 9/22/02 through 10/5/02

IFF BD#'s		10% QC Check problem found	Corrective Action Taken	Date Corrected
BD-002048		Soil sample locations not posted on the property sketch.	Locations added by sampling team	10/24/2002

INFORMATION FIELD FORM (continued)

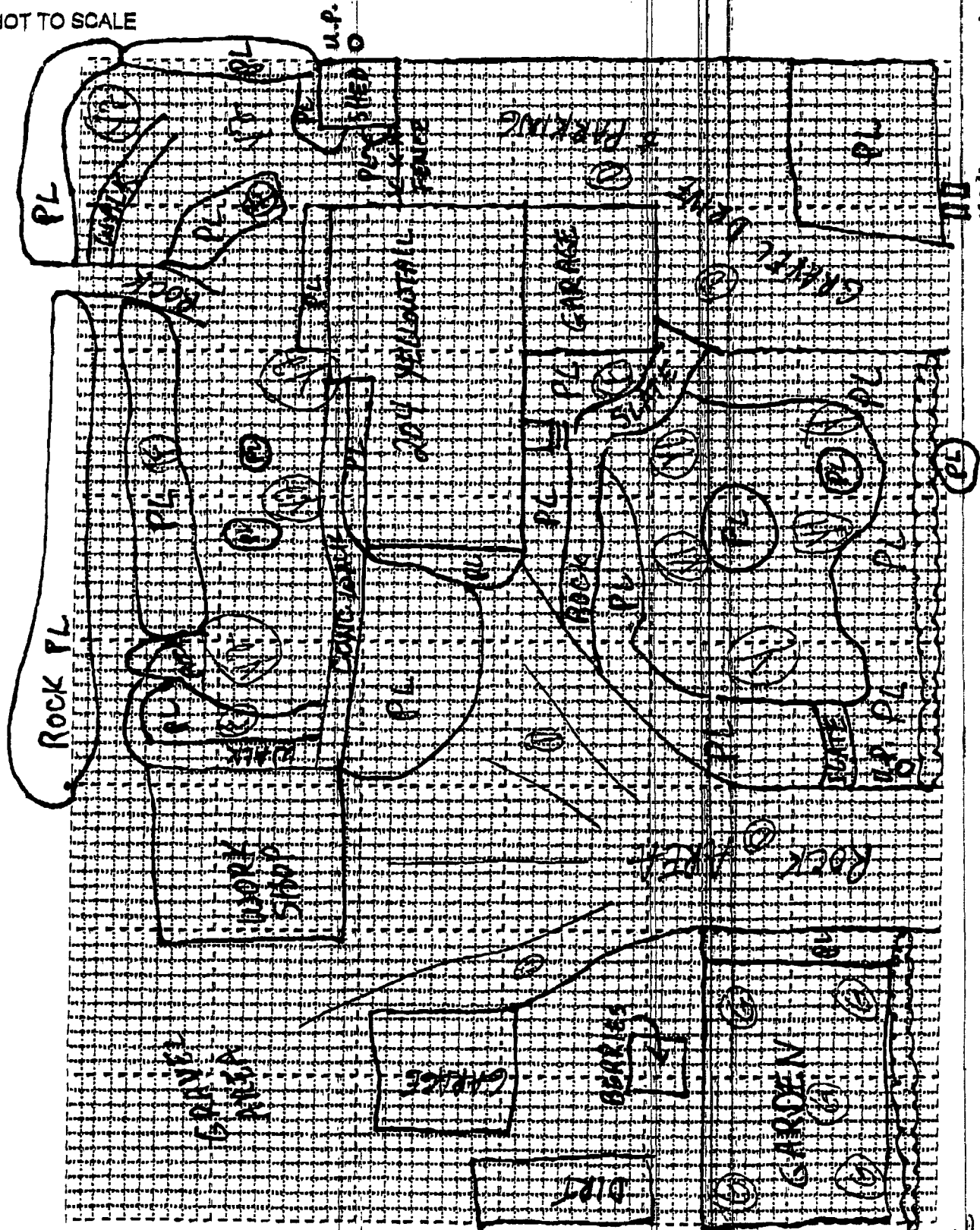
204 YELLOWTAIL

BD# 008048

FIELD DIAGRAM OF PROPERTY

Identify important features (i.e. drainage, trees, gardens, structures, flowerbeds, utility poles, known underground utilities, suspected Libby amphibole source areas, sample locations, etc). Include north arrow.

NOT TO SCALE



U.F. - utility role
PL = planter

204
YELLOWTAIL

FSDSs that need to be corrected:

Period: Paperwork received for 9/22/02 through 10/5/02

FSDS CSS#'s	10% QC Check problem found	Corrective Action Taken	Date Corrected
No problems found			

CSS Task Leader Screening Field Checks (2% checks) for 9/22/02 - 10/5/02

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BD-002588	127 Upper Flower Creek Rd	No issues

BD- 002506

☒ Soil samples collected (Date: 10-5-02 w3)LIBBY ASBESTOS PROJECT
Contaminant Screening Study

Primary Structure and Property Assessment Information Field Form (IFF)

Field Logbook No.: 100134 Page No.: 115 Site Visit Date: 10/02/02
 Address: 1290 E. 5th Extension Structure Description: House
 Occupant: Frieda Peek Phone Number: 203-01049
 Owner (if different than occupant): Frieda Phone Number: —
 Sampling Team: SK 12/02/02 Dean Wielowski Kim Taylor De Waverin
 Field Form Check Completed by (100% of forms): De Waverin
 Screening Field Check Completed by (2% of forms): De Waverin CDM

Data Item	Value	Notes
HOUSE ATTRIBUTES		
Property Description	<input checked="" type="radio"/> Residential <input type="radio"/> Industrial <input type="radio"/> Commercial	
Surrounding Land Use	<input checked="" type="radio"/> Residential <input type="radio"/> Industrial <input type="radio"/> Commercial School Mining Other: <u>10/02</u>	
Year of Construction	<u>1974</u> Unknown <u>1954</u>	
Square Footage	<u>1200</u> (<u>30 x 40</u>)	
Construction Material	<input checked="" type="radio"/> Wood frame <input type="radio"/> Masonry/Stone Other: <u>—</u>	
Number of Floors Above Ground	<input checked="" type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 Other: <u>5 KT 10/2/02</u>	
Number of Rooms Per Floor Above Ground	1: <u>5</u> 2: <u>—</u> 3: <u>—</u> Other: <u>5 DW 10-2-02</u>	
Basement	Yes <input type="radio"/> No <input checked="" type="radio"/>	
Heating Source	Wood/Coal Electric Propane/Gas Other: <u>Oil</u>	
Heat Distribution	<input checked="" type="radio"/> Forced air <input checked="" type="radio"/> Radiant Other: <u>—</u>	

CDM Federal Programs Corporation

Quality Control Review Sheet

Contract Name: <u>RAC VIII</u>	Project Number: <u>3282-116</u>
Document Type: <u>Final SAP Addendum</u>	Number of Pages: <u>10</u>
Document Title: <u>DCN " " for Drive In Theater - #15682</u>	
Initiated By: <u>K. Lippold</u>	Product Author: <u>K. Lippold</u>
Date Initiated: <u>9/26/02</u>	Date Due to Client: <u>9/26/02</u>
QCC:	Internal Due Date:

Reviews Required	Document Version
<input type="checkbox"/> Editorial <input checked="" type="checkbox"/> Technical <input type="checkbox"/> QCC <input checked="" type="checkbox"/> QA	<input type="checkbox"/> Preliminary Draft <input type="checkbox"/> Working Draft <input type="checkbox"/> Final Draft <input type="checkbox"/> Final Document
<input type="checkbox"/> Regulatory Review <input type="checkbox"/> Engineering Review <input type="checkbox"/> Other:	
Estimated Review Hours: Editorial: _____ Technical: _____ QCC: _____ QA: _____ Regulatory: _____ Engineering: _____ Other: _____ Charge Number: <u>3282-116-PP2-SAPDE</u>	

*QA review is required for work plans, field plans, measurement reports, and documents procuring technical services.

Editorial Reviewer:	Due Date	Date Reviewed	Signature
Report Item	No Changes	See Text for Changes	Please Call to Discuss
Overall Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Format	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clarity, Consistency, Grammar	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reference List/Citations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tables/Figures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
QCC Confirmation of Changes <input type="checkbox"/>			

Technical Reviewer:	Due Date	Date Reviewed	Signature
Report Item	No Changes	See Text for Changes	Please Call to Discuss
Intended Scope Stated	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Technical Adequacy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Calculations Checked	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Tables/Figures Support Text	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Conclusions Justified	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
QCC Confirmation of Changes <input type="checkbox"/>			

Additional Reviewer: <u>A. DeLuco</u>	Date Reviewed: <u>9/26/02</u>	Signature: <u>[Signature]</u>
<input checked="" type="checkbox"/> QA <input type="checkbox"/> Regulatory <input type="checkbox"/> Engineering <input type="checkbox"/> Other		

Word Processor:	Signature:
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QCC Final Confirmation Signature: _____ Date: _____